

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 09/685,432
APPLICANT(S) /

FILED DATE

7-28-04		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		7-28-04					
	NO	DEF	NO	DEF	NO	DEF		NO	DEF	NO	DEF
1	/						91				
2	/						92				
3	/						93				
4	/						94				
5	/						95				
6	/						96				
7	/						97				
8	/						98				
9	/						99				
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48	/										
49	/										
50	/										
TOTAL NO.		TOTAL DEF.		TOTAL CLAIMS		TOTAL NO.		TOTAL DEF.		TOTAL CLAIMS	
1		18		19		1		18		19	